

MUSIC TO GO MOBILE DJ PARTY FAX COVER

Ed & Kris Robertson
5904 Pleasant Farm Drive
Beaufort, SC 29906
Phone: 843-525-6944
Fax: 843-525-6882

Web Site: www.musictogomobiledj.com
E-mail: info@musictogomobiledj.com

Please return this cover page and page 1 of work order with your deposit to us as soon as you can so we can confirm your date! You may send the rest of the form as soon as you have it completed. Thank You!

PAGES INCLUDING COVER PAGE: _____

1st Contact Date: _____

Mailed or Faxed To: _____

Customer Phone #: (H) _____ (W) _____

Cell Phone #: _____

Customer E-mail: _____

Attention: _____,

Thank you for contacting Music To Go Mobile DJ!

We understand that you are interested in having a DJ on the following Date _____

for a _____ to be held at the following address _____

Begin Playing Music: _____ End Playing Music: _____

Total Hours of Playing Music requested? _____

Club Contact: _____

Have we received your \$100.00 deposit and all _____ pages of your Work Order? (Yes or No). (Please retain a copy for your records). Balance of \$ _____ due after last dance on your function date.

Sincerely,

Customer Signature Below:

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MUSIC TO GO MOBILE DJ PARTY WORK ORDER

Phone: 843-525-6944 Fax: 843-525-6882

Web Site: www.musictogomobiledj.com

E-mail Address: info@musictogomobiledj.com

Date: _____

Type Function: _____

Location Of Function: _____

If held in a Gated Community, who will add the DJ to the entry list? _____

Times available for us to set-up our equipment: _____

Where will our equipment go? _____

Begin Playing Music: _____ End Playing Music: _____ Total Hours Needed: _____

The DJ should dress Formal or Informal? Please Explain: _____

Name of Contact: _____ Home Phone # _____

Work Phone # _____ Fax # _____

E-mail Address: _____

Home Address : _____

2nd Contact: _____ Home Phone # _____

Work Phone # _____ Fax # _____

E-mail Address: _____

Home Address : _____

3rd Contact: _____ Home Phone# _____

Work Phone # _____ Fax # _____

E-mail Address: _____

Home Address : _____

Where did you find out about us? _____

How many guests will you have? _____ Age Group of Guests? _____

Will there be any other specific Party Dances that you would like us to do? Yes or No.

Special Dances:

Type of Dance:

Please List Song Titles and Artists Below:

Will there be any toasts, speeches, or announcements planned? Yes or No. Our service includes making any announcements you request, or we can accommodate others who may wish to do so. (Ex: ticket sales, drawings, gift certificates, etc.) Will you need a cordless microphone? _____

Will there be any guests that you would like us to honor? Yes or No. If yes, please explain: _____

Will there be a cocktail hour, light snacks or a sit down dinner? Please Explain: _____

What would you like us to play for the Last Dance Song? Please provide us with the Song Title and Artist: _____

A four - hour function requires approximately 80 songs. Please view our web site at www.musicmogomobiledj.com to review our song lists. You are welcome to print out our lists and check off your favorite songs for us to play! Call us if you can't find a song!

Our Musical Interests Include: (Please Check the ones you prefer.)

- | | | |
|--|------------------------------------|---|
| <input type="checkbox"/> 40's and 50's | <input type="checkbox"/> Big Band | <input type="checkbox"/> Motown |
| <input type="checkbox"/> 60's and 70's | <input type="checkbox"/> Beach | <input type="checkbox"/> Children's |
| <input type="checkbox"/> 80's and 90's | <input type="checkbox"/> Christian | <input type="checkbox"/> Group/LineDances |
| <input type="checkbox"/> 90's-2000 | <input type="checkbox"/> Country | <input type="checkbox"/> Irish |
| <input type="checkbox"/> 2000-Present | <input type="checkbox"/> Top 40 | <input type="checkbox"/> Classical |

Please give us your full music selection list for your event at least 3-Weeks in advance of your function. Do you want the DJ to pick out the songs after you have selected your favorite songs? Yes or No. Please Explain: _____

Other Types of Music that you would enjoy: _____

Would you like us to Honor Requests? Yes or No. Even if the requests should conflict with the format you have chosen. Yes or No. Please Explain: _____

Please list the person(s) who will cue us in as to the volume level adjustments through out your function: _____

How will your plans change in the event of Bad Weather? _____

What specifically do you **NOT** want to hear or have happen at your function? _____

Do you want to make or bring some Special Music of your own? Yes or No. If yes, please drop these Regular Format CD's, Cassette Tapes, or Records off to us at least three weeks prior to your event. This way we can listen to them to check for scratches or defects in the sound quality.

<u>CD, Cassette Tape or Record:</u>	<u>Song and Artist:</u>
_____	_____
_____	_____
_____	_____
_____	_____

Customer Signature: _____
(This ensures that your personal music is kept separate from our music library and acts as a reminder to the DJ to return your music to you before the end of your event!)

Please share any concerns that you may have before the date of your function. If we organize and brainstorm together, the day of your function will be a positive one! Remember to tell us before the date of your function about any vocalists and other performers so we can make sure that we have compatible equipment and we can work out our timing to ensure that things flow smoothly.

MUSIC TO GO MOBILE DJ EQUIPMENT AND SET-UP

We require an approximately 6'X10' area to set up our unit and two outlets to run our system. We go to each job with 2 CD Players, 2 Cassette Players, 2 Turntables, a Mixer, a Microphone, 2 Amplifiers and 2 Speakers. Our library consists of music from the Big Band Era to the Present. One banquet table is helpful to hold our library.

The Customer may request the following Equipment at no additional fees:

- 2-Light Tree Stands (4-Colored Lights Each & Pin Spot) & Lighting Control Box
- Mirror Ball
- Strobe Lights (2-Box Shape)
- Black Lights (2-Double Bulb Four Feet Long and 1-Single Bulb Two Feet)
- Cordless Microphone & Boom Stand
- Clip On Microphone
- Limbo Poles (Pick Flag design, or Valentine's)
- Hula Hoops
- Back Up Generator & Gas (for remote areas & must be used out side)
- Fog Machine & Fog Solution (best used in a well-ventilated area)
- Animated Skeleton
- Animated Santa
- Party Wheel

Directions to the Function:

Event location contact person and phone #. _____

Setting up the Equipment:

Will your event be held in a Gated Community? Yes or No.

Will there be another function in the same place prior to yours? Yes or No.

Set-up the Equipment: Inside or Outside. If Outside, will a Tent/Covering be provided for the DJ? Yes or No.

If Inside, will we set-up our Equipment on a Stage? Yes or No.

Will there be Stairs or a Loading Ramp? Yes or No.

Will we be using an Elevator? Yes or No.

Please list any Banquet Room/ House #'s, Names or Letters. _____

MUSIC TO GO MOBILE DJ FEES AND POLICIES

Deposit: We require a \$100.00 deposit to confirm the date you have requested.
(Please put the date of your function on the bottom corner of your check – Thanks!)

Balance: The balance is due immediately following the completion of your function.

Consultation Fees: \$25.00 per hour, (after the first hour)

Cancellation Policy: In the event that the customer cancels, the deposit is nonrefundable.

Make Checks Payable To:

Edward D. Robertson
5904 Pleasant Farm Drive
Beaufort, S.C. 29906

Home phone: (843) 525-6944
Fax: (843) 525-6882
E-mail: info@musictogomobiledj.com

Additional Fees for Out Of Town or Long Carries May Apply.

PLEASE READ THE FOLLOWING CAREFULLY!

1. I (We) have chosen ____hrs. actual playing times. Should be the same as “total hours needed” on Page (1) . Over time rounds up to a fee of an additional hour.
2. The full fee for my function will be \$____._____.
3. The deposit of \$100.00 is to be paid in advance & is included in the fee price.
4. The balance of \$____._____is due on the date of my function immediately following the last song played by MusicTo Go Mobile DJ.
5. I have read all (6) pages of the MTG Mobile DJ Party Work Order, including the Fax Cover, Fees & Policies, and this page. I sent all (6) pages back to Music To Go Mobile DJ. (Please retain a copy for your records).
6. This work order only goes out with the DJ to your function. If attachments are necessary, please call us before faxing any new information and verify receipt after sending. Also, write your name and the date of your function on all attachments.
7. Please send your song requests to us at least three (3) weeks prior to your function.

Customer Signature:_____Date:_____

Customer Signature:_____Date:_____

MUSIC TO GO MOBILE DJ SERVICE

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Our customers are the heartbeat of our business.

Your Opinion Matters to Us! (Please complete after your event & Fax/E-mail to the above address)

1. Date, location, & type of event: _____
2. Did our booking staff communicate in a professional manner? Yes or No
3. Were your phone calls/e-mails answered quickly? Yes or No
4. Were your questions/concerns handled before your event? Yes or No
5. Was the information on our web site helpful? Yes or No
6. Was the information on our work order helpful? Yes or No
7. DJ(s) in Attendance: _____
8. Did the DJ(s) arrive on time and begin the music on time? Yes or No
9. Were the DJ(s) dressed as you requested? Yes or No
10. Was the type of music that you requested played? Yes or No
11. Were volume level adjustments made as needed? Yes or No
12. Were the DJ(s) sensitive to your needs & the needs of your guests? Yes or No
13. Did the DJ(s) work well with other vendors present? Yes or No
14. Did the DJ equipment appear to be in good working order? Yes or No
15. Were announcements made as requested? Yes or No
16. Would you recommend our service to others? Yes or No
17. Tips are never to be solicited, but if given, please list amount. \$_____.
18. Your Comments: _____

18. Your Name, Address, Phone #, & E-mail: _____

19. May we use your comments on our web site? Yes or No

(Feel free to add additional information or suggestions! Thank you for your time!)

Additional page attached (yes or no)

Customer Signature _____ Date: _____